

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION**

**IN RE:
PHILIP DON & RHONDA L LOVELL
DEBTORS**

CASE NO: 20-31108-BJH-13

REPORT OF (ADJOURNED) SECTION 341 MEETING

General Case Information

Case Information:	<p style="text-align: center;"><u>Hearing Information:</u></p> <p>341 Meeting Date: May 21, 2020</p> <p>Days from Petition: 46 days</p> <p>Original 341 scheduled: May 21, 2020</p> <p>Confirmation Hearing set: Jun 18, 2020</p> <p>No Show/ID NOI Sent: 04/12/1900</p> <p>NOI for 1st Pymt Sent:</p>		<p style="text-align: center;"><u>Payment Information:</u></p> <p>Plan Base Amount: \$100,500.00</p> <p>Plan Term: 60 months</p> <p>Current Monthly Payment: \$1,675.00</p> <p>First Payment Due: May 06, 2020</p> <p>Amount Paid to Trustee: \$1,675.00</p>												
Meeting Information:	<p>Debtor(s) Appeared? Dr 1 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Dr 2 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>ID Checked: <input checked="" type="checkbox"/> Dr 1 <input checked="" type="checkbox"/> Dr 2</p> <p>SSN Checked: <input checked="" type="checkbox"/> Dr 1 <input checked="" type="checkbox"/> Dr 2</p> <p>Debtor(s) Attorney / Paralegal Appeared? <input checked="" type="checkbox"/></p> <p>Pro Se <input type="checkbox"/></p> <p>Creditor Appeared? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>														
Hearing Status:	<p>341 Meeting Concluded: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Debtor was asked the standard questions: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Debtor confirmed that all the information contained on the Petition, Schedules, Statement of Financial Affairs, and CMI form was true and correct and needed no changes or additions to make them true and complete.</p>														
	Presiding Officer Notes:														
Notice of Intent to Dismiss Information:	<table style="width: 100%;"> <tr> <td><input type="checkbox"/> Failure to Appear:</td><td><input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td><td><input type="checkbox"/> Photo ID: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td></tr> <tr> <td><input type="checkbox"/> Wage Directive Info:</td><td><input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td><td><input type="checkbox"/> SSN Card: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td></tr> <tr> <td><input type="checkbox"/> Tax Returns:</td><td><input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td><td><input type="checkbox"/> Paystubs: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td></tr> <tr> <td><input type="checkbox"/> Other:</td><td colspan="2"></td></tr> </table>			<input type="checkbox"/> Failure to Appear:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Photo ID: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Wage Directive Info:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> SSN Card: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Tax Returns:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Paystubs: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Other:		
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<input type="checkbox"/> Other:															
Legal Action Needed:	<p><input type="checkbox"/> Trustee's Motion to Transfer Venue Needed:</p> <p><input type="checkbox"/> Serial Filer:</p> <p><input type="checkbox"/> Other:</p>														
Confirmation Issues															
Best Interest:	<p>Exemptions: <input type="checkbox"/> Federal <input checked="" type="checkbox"/> State - Texas <input type="checkbox"/> State - Other:</p> <p>Exceeds \$170,350.00 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> n/a</p> <p>Value (equity) of non-exempt property (provide detail below): \$2,806.15</p> <p>firearms \$1,800.00, bank \$1,006.15.</p> <p>Total Value of Assets listed as Exempt on Schedule C: \$121,760.55</p> <p>Improper Exemption: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Explain:</p> <p>Fraudulent Transfer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Explain:</p>														

REPORT OF (ADJOURNED) SECTION 341 MEETING, Page 2

Case # 20-31108-BJH-13

PHILIP DON & RHONDA L LOVELL

	Presiding Officer Notes:
Feasibility:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Presiding Officer Notes:
Disposable Income:	Below Median Income Debtor's Projected Monthly Disposable Income: \$1,775.00 x ACP: 36 = \$63,900.00 Presiding Officer Notes:
Good Faith:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Presiding Officer Notes:
(Petition & Plan Issues:)	<input type="checkbox"/> Insufficient Plan. Presiding Officer Notes:
Domestic Support Obligation (DSO:)	Is Debtor current on Post Petition DSO? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Presiding Officer Notes:
Tax Returns:	Filed previous 4 years: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Affidavit needed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Affidavit rcvd <input type="checkbox"/> Yes <input type="checkbox"/> No Number of Exemptions on last year: 2 Notes: 2018 Number in Household per CMI: 2 Notes: Presiding Officer Notes:
Business Case:	Is this a Business Case? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Level: Presiding Officer Notes:
Civil Enforcement:	<input type="checkbox"/> Petition Preparer was involved <input type="checkbox"/> Debtor attorney fees exceed "Standard fee" Presiding Officer Notes:

REPORT OF (ADJOURNED) SECTION 341 MEETING, Page 3**Case # 20-31108-BJH-13****PHILIP DON & RHONDA L LOVELL**

521(a)(1) Information has been filed:	<input checked="" type="checkbox"/> List of Creditors <input checked="" type="checkbox"/> CMI Statement <input checked="" type="checkbox"/> Schedules A,B,C,D,E,F,G and H <input checked="" type="checkbox"/> Schedules I and J	<input checked="" type="checkbox"/> Statement of Financial Affairs <input type="checkbox"/> 342(b) Certificate by Dr Atty <input type="checkbox"/> Dr 1 60 Days Payment Advices <input type="checkbox"/> Dr 2 60 Days Payment Advices
Eligibility:	Certificate of Credit Counseling within 180 days on file <input type="checkbox"/> Yes <input type="checkbox"/> No Provider of Credit Counseling is approved <input type="checkbox"/> Yes <input type="checkbox"/> No Debt limits exceed maximum (S-\$1,184,200 U-\$394,725) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Required for Confirmation:	<input type="checkbox"/> Other reason(s) for Objection to Confirmation:	
	<input type="checkbox"/> Additional document(s) required for Confirmation:	
Presiding Officer Information:	The 341 meeting was heard on: 5/21/2020 By: /s/ <u>David Rainey</u> <div style="text-align: right;">Office of the Standing Chapter 13 Trustee</div>	